

County of Los Angeles
Department of Public Works
Building and Safety / Land Development

BUILDING PERMIT
BL 0910 9507140025

CALABASAS/MALIBU **# 0910**
4111 LAS VIRGENES
CALABASAS CA
Phone: (818) 880-4150 Ext:

<p align="center">WORKER'S COMPENSATION DECLARATION</p> <p>I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation insurance, or a certified copy thereof (Sec. 3800, Lab. C.).</p> <p>Policy No. _____ Company _____</p> <p><input type="checkbox"/> Certified copy is hereby furnished.</p> <p><input type="checkbox"/> Certified copy is filed with the county building inspection department.</p> <p>Date _____ Applicant _____</p> <p align="center">CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE</p> <p>(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)</p> <p>I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.</p> <p>Date _____ Applicant _____</p> <p>NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.</p> <p align="center">LICENSED CONTRACTORS DECLARATION</p> <p>I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.</p> <p>License Number _____ Lic. Class _____</p> <p>Contractor _____ Date _____</p> <p><input type="checkbox"/> I am exempt under Sec. _____</p> <p>B.&P.C. for this reason _____</p> <p>_____ Date _____</p> <p>Signature _____</p> <p><input type="checkbox"/> I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business Professions Code).</p> <p><input type="checkbox"/> I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).</p> <p align="center">CONSTRUCTION LENDING AGENCY</p> <p>I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).</p> <p>Lender's Name _____</p> <p>Lender's Address _____</p> <p>I certify that I have read this application and state that the above information is correct. I agree to comply with all county ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.</p> <p>_____ Signature of Applicant or Agent Date</p>	<p>BUILDING ADDRESS: 1154 BONILLA DR N CLBS CA 90290</p> <p>LOCALITY: TOPANGA</p> <p>NEAREST CROSS STREET: HILLSIDE DR</p> <p>ALIAS:</p> <p>LEGAL ID: TR: 8633 LT: 17</p> <p>ASSR INFO NBR: 4441-020-001</p> <p>OWNER: TEL. NO: DE RECAT, CRAIG J 20952 CANYON TRL TOPANGA CA90290</p> <p>CONTRACTOR: TEL. NO: CRAIG DE RECAT (310) 455-3099 1154 BONILLA DR LIC. NO: TOPANGA CA 90290 NONE</p> <p>APPLICANT: TEL. NO: OSCAR MCGRAW (310) 456-3903 21361 PCH # C MALIBU CA 90265</p> <p>ARCHITECT OR ENGINEER: TEL. NO: OSCAR MCGRAW (310) 456-3903 21361 PCH # C LIC. NO: MALIBU CA 90265 C11019</p> <p>ACTION: REPAIR</p> <p>DESCRIPTION OF WORK: EARTHQUAKE DAMAGE-SFR 1665 SQ FT</p> <p>USE OF EXISTING BLDG: SFR</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>ISSUED ON: 02/27/96</td> <td>PROCESSED BY: SH</td> <td>EXPIRES ON: 07/13/96</td> </tr> <tr> <td>FINAL DATE:</td> <td colspan="2">FINAL BY:</td> </tr> <tr> <td>SQ. FT. SIZE: 1665</td> <td>NO. OF STORIES: 2</td> <td>NO. OF FAMILIES: 1</td> </tr> <tr> <td>SIZE OF LOT:</td> <td>BLDG. NOW ON LOT: 1</td> <td>WITHIN 1000 FT. OF SCHOOL?: NO</td> </tr> <tr> <td>USE ZONE: R-1</td> <td>MAP NO: 150-105</td> <td>FIRE ZONE: 4</td> </tr> <tr> <td colspan="3">SPECIAL CONDITIONS: PP44376/FC 9-1-96/GEO 11-15-96/SOIL 11-13-95/HD 1-9-96 MECH/ENERGY 11-16-95/SCHOOL 27873 1-12-96/COASTAL N/A *</td> </tr> <tr> <td colspan="3">OCCUP GROUP: EXIST: R3 NEW: R3</td> </tr> <tr> <td>TYPE CONST: VN</td> <td>STAT. CLASS: 21</td> <td>DWELL UNITS: 0 APT/CON: NO</td> </tr> <tr> <td>REQUIRED SET BACK: FRONT PL 20 SIDE PL</td> <td>YARD: 20</td> <td>HWY: 5</td> </tr> <tr> <td colspan="2">TOTAL SETBACK FROM</td> <td>EXIST WIDTH: 25 30</td> </tr> <tr> <td colspan="2">SEWER MAP</td> <td>CMP: 25</td> </tr> <tr> <td>BOOK: PRIVATE</td> <td>PAGE:</td> <td>VALUATION: 146,440</td> </tr> <tr> <td colspan="3">FEE DESCRIPTION:</td> </tr> <tr> <td>FEE DESCRIPTION:</td> <td>QUANTITY:</td> <td>UOM:</td> </tr> <tr> <td>B1 PLANCHECK W/ENERGY</td> <td>166500.00</td> <td>VALUATN</td> </tr> <tr> <td>HF COMB GEOL/SOILS ME</td> <td></td> <td></td> </tr> <tr> <td>HK GEO BLDG PLN REV ME</td> <td></td> <td></td> </tr> <tr> <td>12 LDMA PC, VALU GE 70K</td> <td></td> <td></td> </tr> <tr> <td>AA BLDG PERMIT ISSUANCE</td> <td></td> <td></td> </tr> <tr> <td>AC STRONG MOTION RESID</td> <td>146440.00</td> <td>VALUATN</td> </tr> <tr> <td>B2 PERMIT W/ENERGY</td> <td>146440.00</td> <td>VALUATN</td> </tr> <tr> <td>08 CERTIF OF OCCUPANCY</td> <td></td> <td></td> </tr> <tr> <td>14 LDMA PERM, VAL GE 70K</td> <td></td> <td></td> </tr> <tr> <td align="right" colspan="2">TOTAL FEES</td> <td>1,275.94</td> </tr> </table>	ISSUED ON: 02/27/96	PROCESSED BY: SH	EXPIRES ON: 07/13/96	FINAL DATE:	FINAL BY:		SQ. 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* ADDITIONAL DATA ON FILE

LICENSED CONTRACTOR'S DECLARATION

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Class _____ Lic. No. _____

Date _____ Contractor _____

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500.):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his or her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he or she did not build or improve for the purpose of sale.).

☒ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law.).

☐ I am exempt under Sec. _____, B. & P.C. for this reason:

Date 2/27/96 Owner [Signature]

WORKERS' COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:

☐ I have and will maintain a certificate of consent to self-insure for workers' compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

☐ I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier _____ Policy Number _____

(This section need not be completed if the permit is for one hundred dollars (\$100) or less).

☐ I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California, and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date _____ Applicant _____

WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state under the penalty of perjury that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction, and hereby authorize representatives of this county to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent [Signature]

Date 2/27/96

Complete this section for permits in unincorporated
Los Angeles County only

LOBBYIST ORDINANCE CERTIFICATION

This is to certify that I, as permit applicant, am familiar with the requirements of Los Angeles County Code Chapter 2.160 et seq., (relating to the Los Angeles County Lobbyist Ordinance) and that all persons acting on behalf of myself complied and will continue to comply therewith through the application process.

Applicant (Print Name) Samuel Becat

Applicant Signature [Signature]

Company Name (if employed by an entity/agency) _____

Date 2/27/96

OWNER OR AGENT

I HAVE READ THE HAZARDOUS WASTE PERMITTING CHECKLIST AND I AGREE TO THE SCOPE OF THE WORK.

YES ☐ NO ☐

FOR GUIDELINES, SEE THE HAZARDOUS WASTE PERMITTING CHECKLIST.

WILL THE APPLICANT SIGN AND SEAL THE PERMIT?

YES ☐ NO ☐

OR A MIXTURE CONTAINING HAZARDOUS WASTE?

Final -		
Correct & Posted		
House Number-		
Lath-Exterior		
Lath/Drywall-Interior		
Energy Insulation		
Frame		
Slab		
Foundations		
(Setback & Yard)		
Location		
Approvals	Date	Inspector's Signature

Water Certificate	Health Department	Fire Department	Grading	Geological	Pedestrian Protection	(Fence) (Canopy)	Special Inspection	(Conc.) (Masonry)	(Welding)	Lot Drainage	Parking
Required	Yes	No	Date Received	or Approved							

PLANS TO APPLICANT	TO:	RETURNED	DATE	NO.	APPROVED

6-11-96

5-13-96

(12)

County of Los Angeles
Department of Public Works
Building and Safety / Land Development

MISCELLANEOUS PERMIT
MP 0910 9412070001

CALABASAS/MALIBU **# 0910**
4111 LAS VIRGENES
CALABASAS CA
Phone: (818) 880-4150 Ext:

<p align="center">WORKER'S COMPENSATION DECLARATION</p> <p>I hereby affirm that I have a certificate of consent to self insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.).</p> <p>Policy No. _____ Company _____</p> <p><input type="checkbox"/> Certified copy is hereby furnished.</p> <p><input type="checkbox"/> Certified copy is filed with the county building inspection department.</p> <p>Date _____ Applicant _____</p> <p align="center">CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE</p> <p>(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)</p> <p>I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.</p> <p>Date <u>12-7-94</u> Applicant <u>[Signature]</u></p> <p>NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.</p> <p align="center">LICENSED CONTRACTORS DECLARATION</p> <p>I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.</p> <p>License Number _____ Lic. Class _____</p> <p>Contractor _____ Date _____</p> <p><input type="checkbox"/> I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).</p> <p>Lic. or Reg. No. _____ Date _____</p> <p align="center">HOME OWNER-BUILDER DECLARATION</p> <p>I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):</p> <p><input type="checkbox"/> I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).</p> <p align="center">CONSTRUCTION LENDING AGENCY</p> <p>I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).</p> <p>Lender's Name _____</p> <p>Lender's Address _____</p> <p>I certify that I have read this application and state that the above information is correct. I agree to comply with all county ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.</p> <p>Signature of Applicant or Agent <u>[Signature]</u> Date <u>12-7-94</u></p>	<p>BUILDING ADDRESS: 1154 BONILLA DR N CLBS CA 90290</p> <p>LOCALITY: TOPANGA</p> <p>NEAREST CROSS STREET: HILLSIDE DR</p> <p>ALIAS:</p> <p>LEGAL ID: TR: 8633 LT: 17</p> <p>ASSR INFO NBR: 4441-020-001</p> <p>OWNER: _____ TEL. NO: _____ DE RECAT, CRAIG J 20952 CANYON TRL TOPANGA CA 90290</p> <p>CONTRACTOR: _____ TEL. NO: _____ MC GRAW, OSCAR 21361 PCH #C MALIBU CA LIC. NO: _____ NONE</p> <p>APPLICANT: _____ TEL. NO: _____ MC GRAW, OSCAR 21361 PCH #C MALIBU CA</p> <p>APPLICATION FOR: GEOLOGY INSPECTION</p> <p>LIST ITEMS:</p> <p>USE OF EXISTING BLDG:</p> <p>DESCRIPTION OF WORK: SITE INSPECTION</p> <p>OCCUP. LOAD- OLD: NEW: NBR OF STORIES: SQ FT SIZE: _____ 1</p> <p>LOT SIZE: BLDGS NBR OF ON LOT: EXITS: EXIT TYPE:</p> <p>OCCUP GROUP- EXIST: NEW: R3 CONSTRUCTION TYPE: V</p> <p>MAP NO: HIGHWAY TYPE:</p>	<p>ISSUED ON: 12/07/94 PROCESSED BY: EA EXPIRES ON: 12/07/95</p> <p>FINAL DATE: _____ FINAL BY: _____</p> <p align="center">PARKING SPACES</p> <p>USE ZONE: _____ REQUIRED: PROVIDED: _____</p> <p>SPECIAL CONDITIONS:</p> <p>LIMITED TIME USE FROM: LIMITED TIME USE TO:</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th align="left">FEES PAID- FEE DESCRIPTION:</th> <th align="left">QUANTITY:</th> <th align="left">UOM:</th> <th align="left">AMOUNT:</th> </tr> <tr> <td>12 GEOTECH SITE REVIEW</td> <td></td> <td></td> <td align="right">0.00</td> </tr> <tr> <td>14 PERM ISSU GEO/SITE</td> <td></td> <td></td> <td align="right">0.00</td> </tr> <tr> <td>24 COMB SOILS/GEO MATLS</td> <td></td> <td></td> <td align="right">0.00</td> </tr> <tr> <td align="right" colspan="3">TOTAL FEES</td> <td align="right">0.00</td> </tr> </table>	FEES PAID- FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:	12 GEOTECH SITE REVIEW			0.00	14 PERM ISSU GEO/SITE			0.00	24 COMB SOILS/GEO MATLS			0.00	TOTAL FEES			0.00
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COUNTY ORDINANCE CERTIFICATION

I hereby certify that I, as permit applicant, am familiar with the requirements of the Los Angeles County Code Chapter 2-160 et seq., (relating to the Los Angeles County Ordinance) and that all persons acting on behalf of myself have complied and will continue to comply therewith through the application process.

APPLICANT (Print Name) _____ **APPLICANT SIGNATURE** _____

COUNTY NAME (if employed by an entity/agency) _____ **Date** _____